

TOWN OF FLORENCE

SPECIAL EVENT PERMIT

AND

SPECIAL EVENT LIQUOR LICENSE APPLICATION

NAME OF EVENT	
EVENT DATE (S)	
EVENT LOCATION	
DATE RECEIVED	



Town Hall 775 North Main Street Florence, Arizona 851232

Phone: 520-868-7500 Fax: 520-868-7564

Special Events Permit and Special Event Liquor License Application

Date of Application: _____ Permit Application #: _____

This application MUST be submitted a minimum of 60 days prior to the event.

for all services related to event pr facility maintenance, field services ing: special event liquor, tents, ger	roduction which may include, but, sanitation, engineering, site sunerators, parades, fireworks, but als, and haunted houses. It is e	e and are expected to fully reimburse the Cit- ut are not limited to: police, fire/EMS, park a supervisors, and all necessary permit fees inclusion parricades, carnival, expected that all applicants have their events	nd Jd-
stage, sound amplification syste facilities, generators, carnival or consumption, alcohol service are	ms, tents, cooking areas, port amusement rides, fireworks, eas, security check areas, stree and all other special features include traffic flow and contr	ocation of fences (including type and height table restrooms or permanent restroom parking areas, entrances to areas for alcoh et or alley closures, location of emergency s that may apply, must accompany this cols.	
Name of applicant/Must be on sit	e during event		
()		()	
Phone Number		Fax Number	_
()		()	_
Cellular Phone Number		Pager Number	
Business Address			
City, State, Zip			
E-Mail Address			
Corporation/Organization Name	or D.B.A.		
State of Incorporation	Tax ID#	City Sales Tax ID#	

SECTION 2: EVENT INFORMATION

ls this event open	to the public?	Y	es _	No	
Name of Event					
Nature of Event (d	carnival, dinne	r, dance, concer	t, bazaar, etc.)		
Event Date(s)/Day	ys of the Wee	k			
Event schedule an	d anticipated	attendance:			
HOURS:					
DATE:	DAY:	FROM A.M./P.M.	TO A.M./P.M.	ANTICIPATED DAILY ATTENDANCE	ANTICIPATED PEAK DAILY ATTENDANCE
DAY 1:					
DAY 2:					
DAY 3:					
DAY 4:					
DAY 5:					
DAY 6:					
DAY 7:					
DAY 8:					
DAY 9:					
DAY 10:					
What is attendan	ce estimate bo	ased on? (Past e	vent, advance ti	cket sales, etc.)	
Set up (Date/Time	e)			Tal	ce Down (Date/Time)
Location of Event	Address (Plec	ase complete Se	ction 4 of this ap	oplication to address tr	affic issues)
Purpose of Event	(Fundraiser, fe	ellowship, etc.)		Event	Sponsor(s)
Have vou hired a	promoter to c	oraanize this eve	ant? Yes	No	

If yes, provide promoter's informa	tion:	
Promoter's Name	Address	Phone Number
Has this event ever been held at a	nother location? Yes	No If yes, please explain:
Date(s) Location(s)	Contact Name	Phone Number
If held at another location previou Yes No Nature of p		eighborhood disturbance, noise, traffic, etc.)
Will alcohol be served at the ever If yes, please complete Section 6	nt? Yes No	
Will there be a charge for admiss	ion? Yes No	
If yes, provide all price categories	::	
Will there be entertainment? if necessary):	Yes No If yes, co	emplete the following (attach additional sheet
Type of Entertainment	Name of Entertainer	Scheduled Time
If music, what type of music?		# of stages
Will a professional company be u	sed? <u> </u>	cate the number of speakers to be used and
the size of amplicfication system. $_$		
Based on the nature, duration, time be reasonable to anticipate any p problems and/or deal with proble	oroblems? <u> </u>	past experience, etc., of the event would it res, what measures will be taken to prevent

- The Town of Florence reserves the right to control the level of sound on any entertainment production.
 Sound levels shall be adjusted to conform to all applicable laws and ordinances.
- Due to the physical location of some facilities, the complications of outdoor performance and wind changes, there can be significant challenges regarding sound levels with neighboring areas.

Will there be any novelty items sold?	Yes No	If Yes, please desc	ribe:
Item	Vendor Selling		Price(s)
Will there be any contracted concession	onaires/caterers?	_ Yes No	
Name of concessionaire/caterer	Address	Phone	Items being sold
How many vendors are anticipated? _			
(All vendors must have a Town of Flore	nce business license. See a	ttached forms & regulation	ons). See Addendum A
SECTION 3: EVENT LOGISTI plan mentioned in page 1) Event location complies with zoning reg			be included in site
WILL THE EVENT INCLUDE ANY OF T	HE FOLLOWING?		
TENTS OR CANOPIES Yes	s No If yes, prov	vide the following:	
Company			
Address			
Contact	Phor	ne:	
Number of Tents	Size(s)		
 Tents over 200 sq. ft. and canopies and canopies will be inspected for fi Department at 520-868-7609. Fee 	ire safety by the Fire Depo	irtment prior to the event	. Contact the Fire
OPEN FLAMES OR COOKING	Yes No If ye	es, provide the following:	:
Fire Department will be on site to	inspect all vendors.		
• FIREWORKS Yes	No If yes, provide	the following:	
Company			
Address			
Contact	Ph	one:	

*Fireworks require special permits from the Town of Florence Fire Department. Contact the Fire Department at 520-868-7609 (See Addendum C)

• PORTABLE RESTROOMS Ye	s No if yes, provide the following:
What sanitary facilities will be available to	attendees? (Indicate location on site plan)
Company	
Address	
Contact	Phone:
**Guideline for anticipated attendance/po alcohol is served; 100 people per unit it	rtable restrooms ratio for a 6 hour event: 80 people per unit if alcohol is not served.
• SANITATION (Indicate location on site	plan)
Number of trash cans	
Location	
ELECTRICAL SERVICES/GENERATORS	Yes No If yes, provide the following:
Company	
Address	
Contact	Phone:
CARNIVAL/AMUSEMENT RIDES	Yes No If yes, provide the following:
Company	
Address	
Contact	Phone:

^{*}An additional special permit from the Town of Florence Fire Department is required. Contact the Fire Department at 520-868-7609 (See Addendum B).

 SIGNS/BANNERS Yes No				
Content				
Locations:				
• INFLATABLES Yes No				
Company				
Address				
Contact Pho	one:			
How will inflatables be secured?				
OTHER — Description of any other activities at the event				
PLEASE NOTE THAT ANY OR ALL OF THE ABOVE SPECIAL FEAREGULATIONS.	ATURES NEED TO COMPLY WITH ZONING			
PERMITS OR LICENSES	PERMIT/LICENSE FEE			
Business License Fees—Carnival License	\$75.00			
Fire Fees—Fireworks; manufacture, compound, store	\$500.00			
Each new location	\$300.00			
Repeat locations—previously approved	\$200.00			
Multiple displays	\$200.00			
Fire Fees—Fireworks Display cost				
\$1-1000	\$100.00			
\$1001-5000	\$200.00			
\$5000 or more (per every \$1000)	\$100.00			
Fire Fees—Mall, Trade Shows, Exhibits in building or structures				
Temporary booth display	\$75.00			
Open flame producing devices or demonstrations	\$100.00			
Compete or demonstration of liquid or gas gulled vehicles or equipment	\$200.00			
Fire Fees—Place of Assembly				
Trade show, concert or exhibition 1-5000 sf	\$150.00			
Trade show, concert or exhibition 5001 or greater sf	\$300.00			
Fire Fees—Carnivals and fairs	\$100.00			

SECTION 4: STREETS/TRAFFIC (must be included in site plan mentioned in page 1) (See Addendum D).

TOWN STREETS Street	Yes No From/To	If yes, provide the Date(s)	e following: Time(s)		
• TOWN SIDEWALKS Street	Yes No From/To	If yes, provide the Date(s)	following: Time(s)		
TOWN ALLEYS	Yes No	If yes, provide t	the following:		
Alley	From/To	Date(s)	Time(s)		
PUBLIC PARKING LOTS	S Yes No	If yes, provide the	e following:		
Parking Lots	From/To	Date(s)	Time(s)		
	available				
	approved by the Police and Fire l	•	ed in this plan.		
THIS INC. TO THE TAIL	-	STREET RELATED FEES			

DESCRIPTION	FEES
Street Closure	\$
Parade Permit	\$

SECTION 5: USE OF TOWN FACILITIES

Facilities must be returned to original condition. Will any Town Facilities be used? Yes No If yes, provide the following: Person Contacted Facility Phone Will any Town electric or water hookups be needed? ___ Yes ___ No _ If yes, provide the following: **Electric Location** Service needed (in amps) Water Location Service needed SECTION 6: ALCOHOL (must be included in site plan mentioned on page 1) ⇒ Minors are not allowed in areas designated for alcohol consumption. ⇒ Glass containers and bottles are NOT allowed in Town parks. ⇒ Applicant must be a member of the qualifying organization and authorized to submit application. ⇒ Security is required as specified in Section 7. __ No If Yes, please answer the following: Will there be alcohol at the event? __ Yes __ Yes Will alcohol be sold? __ No ___ Yes Will alcohol be given away? __ No Is alcohol included in the admission price to the event? No This applies to charitable, religious, fraternal or political groups only. If you answered yes to any of the above, a special event liquor license is required. In addition to providing the following information to the Town, the Arizona Department of Liquor Licenses and Control's Application for Special Event License must be submitted. Please submit this application to the Town, the Town Council will review the application and notify you of approval or denial. Which type of license will be used for the event? __ Extension of Premises (attach State of Arizona Application) (See Addendum E) ___ Special Event Liquor License (attach State of Arizona Application) (See Addendum F) Non-Profit Organization's Name Type of organization 501-C-3 # Name of Contact at Charity or Organization Phone Number On-Site Agent Responsible for Liquor

Anticipated attendance in liquor area:

HOURS:

DATE:	DAY:	FROM A.M./P.M.	TO A.M./P.M.	ANTICIPATED DAILY ATTENDANCE	ANTICIPATED PEAK DAILY ATTENDANCE
DAY 1:					
DAY 2:					
DAY 3:					
DAY 4:					
DAY 5:					
DAY 6:					
DAY 7:					
DAY 8:					
DAY 9:					
DAY 10:					
What controls will	be used to ke	eep attendees u	nder the age of	21 from obtaining alco	ohol at the event?
Will more than 50	0% of the ever	nt's gross revenu	ues be derived f	rom alcohol sales?	Yes No
Type of alcohol to	be served: _	Beer	Wine	_spirituous liquor	
How will the alcoh	nol be served?	*Bottles or glo	ıss are not allov	wed in Town facilities	
glasses	_ bottles	_plastic contain	ersdispose	able cups cans	
How will alcohol b	oe obtained? _				
Has the applicant	been convicte	d of a felony in	the past five ye	ears? Yes No	

If yes, please provide a detailed explanation	n including dates, nature, location and disposition.
Has the Applicant/Organization ever had a I Yes No If yes, please explain:	liquor license or event permit denied, revoked or suspended?
If a promoter is used, has the promoter obtain last three years that has created neighborhood If yes, please give specific information includi	
SECTION 7. EVENT SECURITY (m	oust be included in site plan mentioned on page
1)	osi be incloued in she plan memoned on page
the plan and may require the use of off-duty po	plication for all events. The Florence Police Department will review plice officers for the event at the applicant's expense. Off-duty ecial event liquor license. Security controls must also be shown in site
*The Town of Florence only allows security con	npanies that are licensed and bonded in the State of Arizona.
Will private security be used at the event?	Yes No If yes, provide the following:
Security Company	Arizona Department of Public Safety Identification Number
Address	Phone Number
Contact Person	Phone Number (if difference than above)
Number of personnel contracted for:	

Sche	duled hours personnel will be at the event:
Will	the event be requesting off-duty Florence Police Officers? Yes No
If ye	s, provide the following:
FOLI	EVENTS WHERE ALCOHOL WILL BE AVAILABLE, THE SECURITY PLAN MUST INCLUDE THE LOWING INFORMATION. ADHERANCE TO THESE REQUIREMENTS IS NECESSARY IN ORDER FOR THE LICATION TO BE APPROVED.
• T	ype of event, activities, clientele, location, and time of day.
	Number and type of physical control barriers; i.e. fencing, barricading, walls, locked or limited access doors, that control and limit access to and from areas where alcohol is being sold or served.
	Sales and consumption area must be designated. It must include controlled entrances and exits to limit access to people who can legally buy and consume alcohol.
• ^	Minors are not allowed in the area designated for alcohol.
Secu	rity Requirements for the Alcohol Area
\$ \$	Security needs are determined by the number of people estimated to be in attendance in the area designated for the sale and consumption of alcohol. Note that under estimations will result in additional Security being required during the event. Failure to provide additional security will result in immediate suspension of the Special Event Liquor License. All liquor sales and consumption will be stopped mmediately.
	One (1) certified Police Officer or state-licensed private security officer for every 100 in attendance in the area designated for the sale and consumption of alcohol is required.
	One (1) second-level supervisor (an officer of the rank of Sergeant or higher) is required for every four (4) police or private security officers employed.
	One (1) third-level supervisor (an officer of the rank of Lieutenant or higher) is required for every four (4) econd-level supervisors employed.
	ERGENCY MEDICAL SERVICES (must be included on site plan mentioned in ge 1)
	the event request off-duty Florence Fire EMTs/paramedics? Yes No s, provide the following:
Sche	duled hours personnel will be needed at the event:

*After reviewing the event application, the Town may require the use of off-duty EMTs or paramedics for the event. If emergency medical services are required, permittee must provide above information as an amendment to the application before an event permit will be issued. Promoter may be required to provide tent, cots, ice and water. This service is at the expense of the applicant.

SECTION 8: PARADE INFORMATION (must be included on site plan mentioned in page 1) An additional site plan showing parade route must be attached.

Assembly Area		
Disassembly Area		
Number of Units		
Description of the units (M	Notorized, animals, floats, sound amplification).
Attach a proposed route o	and indicate assembly and disassembly areas.	
SECTION 9: PARK	/PLAZA AREAS	
DOES THE EVENT PROPO	OSE CLOSURE OR USE OF ANY OF THE FOLL	OWING?
 Heritage Park 	Yes No If yes, provide the foll	owing:
Specific Area(s)	Date(s)	Time(s)
Main Street Park	Yes No If yes,	provide the following:
Specific Area(s)	Date(s)	Time(s)
• Rodeo Park	Yes No If yes,	provide the following:
Specific Area(s)	Date(s)	Time(s)
 Poston Butte Park 	Yes No If yes	, provide the following:
Specific Area(s)	Date(s)	Time(s)
• Little League	Yes No	s, provide the following:
Specific Area(s)	Date(s)	Time(s)

SECTION 10: INSURANCE REQUIREMENTS AND CERTIFICATE OF INSURANCE (See Addendum G)

All special events that are held on town property or that are co-sponsored by the Town of Florence are required to name the "Town of Florence as an Additional Insured" on the Certificate of Insurance. Complete certificates must be received a minimum of five (5) working days prior to the event. Separate certificates of insurance for \$2 million are required from all carnival and amusement companies and \$5 million from firework companies. For more information, please contact the Town Clerk's Office at (520) 868-7500. Event permits will not be issued until all insurance requirements are satisfactorily met.

SECTION 11: GENERAL INFORMATION AND CERTIFICATION

MITIGATION OF IMPACT

As an event organizer, you are required to notify residents, businesses, places of worship and schools that may be impacted by the noise and street closures related to the event. The notices should be mailed or hand delivered at least two weeks prior to the event. Information on this information should include, but not be limited to; the date(s), day(s), time(s), location(s) and types of activities taking place during your event. The notice must also include a telephone number of where members of the public can contact your organization if they have concerns or issues that need to be addressed.

FEES

There is no fee to process this application. However, fees may be assessed for some town services. Individual Town departments will estimate the cost of accommodating the event. Actual costs may be presented prior to the event or billed by each department and paid by the sponsoring organization upon receipt of billing.

If the event includes the sale of liquor, the fee for a Special Event Liquor License is \$25.00 per event day and must accompany this application. Please not that this is in addition to the State's fee.

BUSINESS LICENSE FEES	
Application Fee	\$10.00
Transient Business (per day)	\$25.00 plus \$5.00 for each helper
Transient Business (per month)	\$300.00

FACILITY USE FEES

PARK OPEN SPACES	CLASS I	CLASS II	CLASS III
Park Open Spaces	N/C	N/C	\$50.00 per area (6 hour minimum)
Ramada (Picnic Area)	N/C	N/C	N/A
Basketball Courts	N/C	\$50.00 per court	\$100.00 per court
Volleyball Courts	N/C	N/C	N/A
Horseshoe Pits	N/C	N/C	N/A

\$100.00 surcharge on Class II & III for non-resident facility use.

Certificate of Insurance shall be required unless waived by the Department Director for all Class II & III facility use permits. The certificate shall name the Town of Florence as additional insured in an amount not less that \$1,000,000.

PARKS & RECREATION FEES

DESCRIPTION	FEE
Pool Parties (Two Hours Minimum)	\$100.00
each additional hour	\$25.00
Ball fields with lights	\$7.00
Ball fields with lights—per hour Class II	\$7.00
Ball Field Rental—Tournament—Class II-1 Fields per tournament—includes prep	\$100.00
Ball Field Rental—Tournament—Class II-2 Fields per tournament—includes prep	\$125.00
Ball fields with lights—per hour Class III	\$10.00
Ball Field Rental—Tournament—Class III-1 Field per tournament—includes prep	\$150.00
Ball Field Rental—Tournament—Class III-2 Fields per tournament—includes prep	\$175.00
Ball field prep—per field	\$25.00
Youth Sports	Varies
Aerobics/Exercise (per session)	\$20.00-\$25.00
Softball League/Tournaments (per team)	\$200.00
Reservation Fee—Swimming Pool & Sporting Tournaments—Non Refundable—If reservation is not cancelled, fee would be applied toward total charge.	\$25.00

STAGE RENTAL

DESCRIPTION	FEE
Normal Business Hours—Class II	\$100.00
Normal Business Hours—Class III	\$125.00
Outside Normal Business Hours—Class II	\$400.00
Outside Normal Business Hours—Class III	\$500.00
Normal Hours of Business and Overtime Hours—Class	\$275.00
Normal Hours of Business and Overtime Hours—Class	\$350.00

REFUNDABLE DEPOSITS

Picnic Pack	\$25.00
Pool & Field Reservation Deposit	\$100.00
Stage Rental Deposit	\$250.00

By signing the below, the applicant is authorized to commit the organization and therefore be financially responsible for any costs and fees incurred by or on behalf of the event.

CERTIFICATION

I hereby certify that I am the applicant filing this application as listed in Section 1 and the statements made in this application are true and complete to the best of my knowledge, and that I am authorized to execute the application. Intentional omissions or falsification of information is sufficient grounds for denial of the application and subsequent revocation of the permit. I agree to indemnify the Town and its respective officers, agents and employees from any and all losses, claims liabilities, damages, costs, and expenses, including reasonable attorney's fees and court costs, resulting from the conduct of the applicant, sponsor or promoter, their employees, suppliers, vendors or agents, or any of their guests, invitees or licensees with regard to the event applied for. I agree to indemnify the Town and its respective officers, agents and employees from any and all losses, claims, liabilities, damages, costs and expenses, including reasonable attorney's fees and court costs, resulting from any facility, park or lake closure due to inclement weather, an issued warning or other emergency situation. In such an instance, I understand that all event participants must follow the Town's guidelines and procedures for lake/facility evacuation and that this event is being held inside the Town limits and all Town rules and regulations apply. I also understand that the Town reserves the right to determine that park facilities are unusable as a result of inclement weather.

Applicant's Signature		Date
	٩)	CKNOWLEDGMENT)
State of Arizona)	
County of Pinal) ss.)	
This instrument was ackr	nowledged before me	his, 20, by
		·
		Notary Public in and for the State of Arizona
My Commission Expires	:	

Please submit application to: Town Clerk's Office PO Box 2670 775 North Main Street Florence, Arizona 85132 Addendum A Business License Application

Addendum B Tent, Canopy, Carnival and Amusement Ride Permit Application

Addendum C Fireworks Permit Application
Addendum D Street Closure Application

Addendum E Extension of Premises Application (State)
Addendum F Special Event Liquor License Application (State)

Addendum G Insurance Specifications

Addendum H Applicant's Personal Information
Addendum I Field Allocation Form for Tournaments
Addendum J Special Security Services Agreement

Addendum K Parade Permit Application
Addendum L Fire Service Agreement